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## Request for Continued Examination (RCE) **Transmittal**

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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|------------------------------------------|--------------------|--|--|--|--|
| Application Number                       | 10/671,922         |  |  |  |  |
| Filing Date                              | September 24, 2003 |  |  |  |  |
| First Named Inventor                     | Derderian          |  |  |  |  |
| Art Unit                                 | 2812               |  |  |  |  |
| Examiner Name                            | L. Gurley          |  |  |  |  |
| Attornev Docket Number                   | MI 22 - 2296       |  |  |  |  |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

| 1.                                                                                                                                                                                    | Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s). |            |                                                                                                                                                                                                                                                                   |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------------------|--|--|--|--|
|                                                                                                                                                                                       | a.                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                                                                                                                                                                                                   | Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                              | i.<br>Ii.  |                                                                                                                                                                                                                                                                   | Consider the arguments in the Appeal Brief or Reply Brief previously filed on  Other                                                                                                 |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       | b.                                                                                                                                                                                                                                                                                                                                                                                           | XX         | Encl                                                                                                                                                                                                                                                              | osed                                                                                                                                                                                 |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                              | 1          | X                                                                                                                                                                                                                                                                 | 18, 2005 Final OA) <u></u>                                                                                                                                                           |                       | atement (IDS)W/PTO-1449            |  |  |  |  |
| _ (                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                              | ii. [      |                                                                                                                                                                                                                                                                   | — Culci                                                                                                                                                                              | PIO Retur             | n Postcard.                        |  |  |  |  |
| 2.                                                                                                                                                                                    | Mi<br>a.                                                                                                                                                                                                                                                                                                                                                                                     | scella     | Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)                                                           |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       | b.                                                                                                                                                                                                                                                                                                                                                                                           |            | Oth                                                                                                                                                                                                                                                               | er                                                                                                                                                                                   |                       |                                    |  |  |  |  |
| 3. {                                                                                                                                                                                  | a.                                                                                                                                                                                                                                                                                                                                                                                           | ees<br>XX  | The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.  The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 23-0925 . I have enclosed a duplicate copy of this sheet. |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                              | i.         | RCE fee required under 37 CFR 1.17(e) (deficiencies only)                                                                                                                                                                                                         |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                              | ii.        | Extension of time fee (37 CFR 1.136 and 1.17) (deficiencies only)                                                                                                                                                                                                 |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       | b.                                                                                                                                                                                                                                                                                                                                                                                           | iii.       | Che                                                                                                                                                                                                                                                               | Check in the amount of \$ 790enclosed (Chk. #148579)                                                                                                                                 |                       |                                    |  |  |  |  |
|                                                                                                                                                                                       | C.                                                                                                                                                                                                                                                                                                                                                                                           | $\Box$     | Pay                                                                                                                                                                                                                                                               | ment by credit card (Form PTO-2038 enclosed)                                                                                                                                         |                       |                                    |  |  |  |  |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.      |                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                                                                                                                                                                                                   |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                                                                                                                                                                                                   |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
| Signa                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                              | nt/Type    | 16                                                                                                                                                                                                                                                                | 9                                                                                                                                                                                    | Date Registration No. | 38,533                             |  |  |  |  |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                                                                                                                                                                                                   |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
| CERTIFICATE OF MAILING OR TRANSMISSION  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient posters mailed an envelope |                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                                                                                                                                                                                                   |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
| addressed to: Mail Stop RCE, Commissioner for Patents, F. G. 1460. Alexandria, VA 233(8): Gertacsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.   |                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                                                                                                                                                                                                   |                                                                                                                                                                                      |                       |                                    |  |  |  |  |
| Signati                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                                                                                                                                                                                                   | 000001000                                                                                                                                                                            |                       |                                    |  |  |  |  |
| Name                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                              | , jpc,     | Ţ                                                                                                                                                                                                                                                                 | EV633201323                                                                                                                                                                          |                       |                                    |  |  |  |  |
| to proc                                                                                                                                                                               | ose'                                                                                                                                                                                                                                                                                                                                                                                         | tion of in | iorma<br>licatio                                                                                                                                                                                                                                                  | tion is required by 37 CFR 1.114. The information is required to obtain or retain a                                                                                                  | benefit by the public | which is to file (and by the USPTO |  |  |  |  |

including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.